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APPLICANTS

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*None (int)*  
*None (int)*

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 06/29/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no Allowance	STATE OR COUNTRY FL	SHEETS DRAWING 3	TOTAL CLAIMS 3	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature <i>mj</i> Initials				

ADDRESS

Louis J. Brunoforte  
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TITLE

Cooling vest system

FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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